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(Depositor's name)	_
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
- 09/891,356	06/27/2001	Niichi Itoh	57454-125	1913

TITLE OF INVENTION: SEMICONDUCTOR DEVICE, DESIGNING METHOD AND DESIGNING DEVICE THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	08/21/2003
EXAMI	NER	ART UNIT	CLASS-SUBCLASS		
THAI, LU	JAN C	2827	257-758000		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent the names of up to 3 registers or agents OR, alternatively, ( single firm (having as a me attorney or agent) and the r	ed patent attorneys (2) the name of a ember a registered names of up to 2  MCDE	RMOTT, WILL & EMERY
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered patent attorneys or is listed, no name will be printe		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MITSUBISHI	DENKI	KABUSHIKI	KAISHA
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Tokyo, JAPAN

Please check the appropriate assignee category or categ	ories (will not be printed on the patent)	ity 🔾 government		
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
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(Authorized Signature)	Ime 3. K	utium (D	Pate)
		Reg. #33,35	51 8/20/200

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